2014

City of Jackson, MS Mayoral Campaign Contributions

Tony Yarber

2014 ELECTION CYCLE

Candidate REPORT OF RECEIPTS AND DISBURSEMENTS 2014 Election

| | Deibe | rt Ho | ser | nanı | 1 |
|----|-------|-------|-----|------|----|
| SI | CRET | ΔRY | OF | STA | TE |

| | | 2017 210 | | | |
|---|--|--------------------------|------------------------|---|--|
| Name of Candidate Tony | Yarber | | | . <u> </u> | |
| Address P.O. Box 1530 J | ackson, MS 39 | 215 | | County Hinds | |
| Telephone (Work) | | (Home) (769) | 798-6200 | _ (Fax) | |
| Contact Name Tony Yark | er | | Email Add | ress tony@yarb | erformayor.com |
| Office Sought Mayor | | | | | |
| Check here if abo | ve is different from ; | previous report | | | |
| | | TYPE OF R | EPORT | | |
| May 27, 2014 Pre-Election R | eport (Januar) | / 1, 2014, through | May 24, 2014) | *************************************** | Mandatory All Primary Candidates |
| June 17, 2014 Pre-Runoff R | eport (May 25 | i, 2014, through J | une 14, 2014) | | Mandatory rimary Runoff Candidates Only |
| October 28, 2014 Pre-Electi | on Report (June | 15, 2014, through | October 25, 2014 | 4) | Mandatory All Candidates |
| November 18, 2014 Pre-Rur | | | | | Runoff Candidates only |
| January 30, 2015 Annual Re | port (January 1, 2 | 014, through Dec | ember 31, 2014) | All Candid | Mandatory ates that made expenditures in MS during the 2014 period |
| • | idate will no longer a enditures and has no | outstanding camp | aign debt obligation | i/edau | red to terminate reporting tions |
| (1) Pre-Election reports are mandate "0" (zero) for total amount of report | | | have occurred, in suc | ch case, the candidate | shall submit a report indicating |
| (2) Until a candidate files a termination | n report, annual and per | iodic reports must still | be filed in accordance | with Miss Code Ann. § | 23-15-807(b) (ii) and (iii) |
| (3) The receiving authority must be in office must be in actual receipt of | | | | | |
| | | | S AND DISBUR | | |
| | (itemized | + non-itemized) | <u> T</u> | his Period | Calendar Year-To-Date |
| Total amount of contributions | \$87,077.00 | + \$8,639 | .00 | \$95,716.00 | \$95,716.00 |
| Total amount of disbursements | \$94,509.65 | + \$410 | .00 | \$94,919.65 | \$94,919.65 |
| Total amount of cash on hand | | | | \$796.35 | 3 to 1 To 1 to 1 |
| I certify that I have ex | /// | nd to the best of n | ny knowledge and i | belief it is true, accu | rate and complete. |
| Signature of C | andidate | | Date | | ≥C ₂ ₹ |
| Authority: Refer to Miss. Code An Penalties: Fallure to submit requir reports shall result in fines of \$50 | ed reports, or failur | e to submit report: | | ith statutory deadline | |
| SEND TO: 1. Candidates for Statewide | , State district, multi-co | ounty and all legislat | | | 21 < 7 |
| Box 136, Jackson, MS 3920 2. Candidates for countywin | | | forms to their counts | v Circuit Clerk | まだっ ニ |
| 3. Candidates for Municipal | • | | - | , oneun oldin. | 0 |
| | - | | | | SOS 05-13 |

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| ITEMIZED RECE | IPTS | |
|---|---------------------------|-----------------------------|
| Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan | Date | Amount of each receipt this |
| Other (please specify) | (Mo., Day, Year) | period |
| Full Name Socrates Garrett | 03/03/2014 | \$15,000.00 |
| Mailing Address | - | |
| 2659 Livingston Rd | | |
| City, State, Zip Code | - | |
| Jackson, MS 39213-6926 | | |
| Name of Employer (Required) Garrett Enterprise | | |
| Occupation (Required) Owner | Aggregate year-to-date | \$15,000.00 |
| Source: Corporation PAC Individual Loan | Date | Amount of each |
| Other (please specify) | (Mo., Day, Year) | receipt this period |
| Full Name | 03/04/2014 | |
| Marcus Wallace | 02/04/2014 | \$5,000.00 |
| Mailing Address 125 South Congress Street | | |
| City, State, Zip Code | | |
| Jackson, MS 39201 | | |
| Name of Employer (Required) | | |
| M.A.C. & Associates | | |
| Occupation (Required) | Aggregate year-to-date | \$5,000.00 |
| Source: Corporation PAC Individual Loan | Date (Mo., Day, Year) | Amount of each receipt this |
| Other (please specify) | | periot |
| W, Hibbett Neel | 03/05/2014 | \$300.00 |
| Mailing Address PO Box 22625 | | |
| City, State, Zip Code Jackson, MS 39225-2625 | | \$° |
| Name of Employer (Required) Neel- Shaffer | | 8 |
| Occupation (Required) | Aggregate year-to-date | \$500.00 |
| Source: Corporation PAC Individual Loan | Date | Amount of each |
| Other (please specify) | (Mo., Day, Year) | receipt this period |
| Full Name | 03/11/2014 | \$10,000.00 |
| Lydia Jones | 03/11/2011 | 710,000.00 |
| Mailing Address | | |
| 314 S Extension St | \dashv | |
| City, State, Zip Code Hazlehurst, MS 39083-3310 | | |
| Name of Employer (Required) Self | | |
| | Azaronto | |
| Occupation (Required) | Aggregate year-to-date | \$10,000.00 |

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| | | | TEMIZI | ED RECE | EIPTS | |
|-------------------------------|-------------------------------------|--------|---------------------|---------|---------------------------|------------------------------------|
| Source: | Corporation Other (please spe | PAC | √ Individual | Loan | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Robert Ke | elly | | | | 03/11/2014 | \$1,500.00 |
| Mailing Addr | | | | | | |
| City, State, Zi | p Code MS 39286-8701 | | | | | |
| Name of Emp Retired | ployer (Required) | | | | | |
| Occupation (| Required) | | | | Aggregate year-to-date | \$1,500.00 |
| Source: | Corporation Other (please spe | PAC | ✓Individual | Loan | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Gerald Mu | ımford | | | | 03/11/2014 | \$300.00 |
| Mailing Addr 4808 N St | | | | | | |
| | MS 39206-4823 | | | | | |
| | ployer(Required) ord Law Firm PI | ,ĽC | | | | |
| Occupation (| Required) | | | | Aggregate year-to-date | \$300.00 |
| Source: | Corporation Other (please sp | PAC | √ individual | Loan | Date (Mo., Day, Yéär) | Amount of each receipt this period |
| Full Name Kelvin R | obinson | | | | 03/11/2014 | 22,000.00 |
| Mailing Addr 238 Merr | | | | | ACK. | R R |
| City, State, Z Jackson, | ip Code MS 39209-3131 | | | | NOS. | |
| Name of Emp | ployer (Required) | | | | 33 | |
| Occupation | (Required) | | | | Aggregate year-to-date | \$1,000.00 |
| Source: | Corporation | PAC | Individual | Loan | Date | Amount of each receipt this |
| Full Name | Other (please sp | ecify) | | | (Mo., Day, Year) | period |
| | Drywall LLC | | | | 03/13/2014 | \$250.00 |
| 3924 W N | orthside Dr | | | | | |
| | MS 39209-2561 | | | | | |
| Name of Em | ployer (Required) | | | | | |
| Occupation | (Required) | | | | Aggregate | \$250.00 |

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|---|--|---------------|---|---|--|
| Source: | ☐ Corporation ✓ Other (please spec | PAC Individu | _ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name | Tamily Reunion C | · · · | | 03/13/2014 | \$647.00 |
| Mailing Addre | | OURUI L Cee | | | |
| City, State, Zi | n Code | | | _ | |
| / | h cone | | | | |
| Name of Emp | oloyer (Required) | | | | |
| Occupation (| Required) | | | Aggregate year-to-date | \$647.00 |
| Source: | Corporation | PAC Individu | lal Loan | Date | Amount of each |
| | Other (please spec | cify) | | (Mo., Day, Year) | receipt this period |
| Full Name Joel Hudr | nall | | | 03/13/2014 | \$500.00 |
| Mailing Addr | | | | | |
| 201 Ivy F | | | | | |
| | MS 39110-6517 | | | | |
| Name of Emp | oloyer (Required) affer | | | | |
| Occupation (| Required) | | | Aggregate year-to-date | \$500.00 |
| Source: | Corporation | PAC Individ | ual Loan | Date | Amount of each |
| | Other (please spe | cify) | | (Mo., Day, Year) | receipt this period |
| Full Name | | | | (Mo., Day, Year) 03/13/2014 | • |
| Full Name Carla Ki: Mailing Addr 137 Munic | rkland | | | _ | period |
| Carla Ki: Mailing Addr 137 Munic City, State, Z | rkland ess ch Dr | | | _ | period |
| Carla Ki: Mailing Addr 137 Muni City, State, Z Madison, Name of Emp | rkland ess ch Dr ip Code | cify) | | _ | period |
| Carla Ki: Mailing Addr 137 Muni City, State, Z Madison, Name of Emp | rkland ress ch Dr resp resp resp ress ch Dr resp resp ress resp resp | cify) | | _ | period |
| Carla Ki Mailing Addr 137 Muni City, State, Z Madison, Name of Emp Marathon | rkland ress ch Dr resp resp resp ress ch Dr resp resp ress resp resp | cify) | ual \[\]Loan | Aggregate year-to-date Date | \$1,500.00 \$1,500.00 |
| Carla Ki: Mailing Addr 137 Munic City, State, Z Madison, Name of Emp Marathon Occupation Source: | rkland ess ch Dr ip Code MS 39110-9082 ployer (Required) Education Group (Required) | □PAC ✓Individ | ualLoan | Aggregate year-to-date | \$1,500.00 \$1,500.00 |
| Carla Ki: Mailing Addr 137 Munic City, State, Z Madison, Name of Emp Marathon Occupation Source: | rkland ess ch Dr lip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Other (please spe | □PAC ✓Individ | ualLoan | Aggregate year-to-date Date | \$1,500.00 \$1,500.00 Amount of each receipt this |
| Carla Ki: Mailing Addr 137 Muni City, State, Z Madison, Name of Emp Marathon Occupation Source: Full Name Barron B Mailing Addr | rkland ess ch Dr lip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Dther (please specianks | □PAC ✓Individ | ual □Loan | Aggregate year-to-date Date (Mo., Day, Year) | \$1,500.00 \$1,500.00 Amount of each receipt this period |
| Carla Ki: Mailing Addr 137 Muni City, State, Z Madison, Name of Emp Marathon Occupation Source: Full Name Barron B Mailing Addr | rkland ress ch Dr lip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Other (please specially spe | □PAC ✓Individ | Loan NOSW3VF OLLY CLEI CLTY CLEI | Aggregate year-to-date Date (Mo., Day, Year) | \$1,500.00 \$1,500.00 Amount of each receipt this period |
| Carla Ki: Mailing Addr 137 Munic City, State, Z Madison, Name of Emp Marathon Occupation Source: Full Name Barron B Mailing Addr 115 Carr City, State, Z Jackson, | rkland ress ch Dr rip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Other (please specials) anks ress iage Hills Dr Zip Code MS 39212-3706 | □PAC ✓Individ | TECEIVE SECEIVE SECEIVE SECEIVE SECEIVE SECEIVE SECEIVE | Aggregate year-to-date Date (Mo., Day, Year) | \$1,500.00 \$1,500.00 Amount of each receipt this period |
| Carla Ki: Mailing Addr 137 Munio City, State, Z Madison, Name of Emp Marathon Occupation Source: Full Name Barron B Mailing Addr 115 Carr City, State, Z Jackson, Name of Emp | rkland ress ch Dr lip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Other (please specially and specially are | □PAC ☑Individ | Telver The APP - 1 AM | Aggregate year-to-date Date (Mo., Day, Year) | \$1,500.00 \$1,500.00 Amount of each receipt this period |
| Carla Ki: Mailing Addr 137 Munic City, State, Z Madison, Name of Emp Marathon Occupation Source: Full Name Barron B Mailing Addr 115 Carr City, State, Z Jackson, Name of Emp | rkland ress ch Dr lip Code MS 39110-9082 ployer (Required) Education Group (Required) Corporation Other (please specially and specially approximately appr | □PAC ☑Individ | The APP - 1 AM | Aggregate year-to-date Date (Mo., Day, Year) | \$1,500.00 \$1,500.00 Amount of each receipt this period |

through 3/31/2014

| ITEMIZED RECEI | P18 | |
|---|---------------------------|------------------------------------|
| Source: Corporation PAC Individual Loan Other (please specify) Committee - Not a PAC | Date (Mo., Day, Year) | Amount of each receipt this |
| Full Name | | period |
| Jackson Associate Local | 03/14/2014 | \$300.00 |
| Malling Address 104 Fairoaks Dr | | |
| City, State, Zip Code | ┥ | |
| Jackson, MS 39212-2223 | | |
| Name of Employer (Required) | | |
| Occupation (Required) | Aggregate year-to-date | \$300.00 |
| Source: Corporation PAC Individual Loan | Date (Mo., Day, Year) | Amount of each receipt this |
| Other (please specify) | (mo., Day, rear) | period |
| Fuil Name Leroy Walker | 03/14/2014 | \$500.00 |
| Mailing Address 5958 Holbrook Dr. | 7 | |
| City, State, Zip Code | _ | |
| Jackson, MS 39206-2062 | _ | |
| Name of Employer (Required) McDonalds | | |
| Occupation (Required) Owner | Aggregate year-to-date | \$500.00 |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Diedra J Jones | 03/17/2014 | \$500.00 |
| Mailing Address 5002 Harling Pl | | |
| City, State, Zip Code Jackson, MS 39211-4742 | | |
| Name of Employer (Required) Kool Smiles | | |
| Occupation (Required) Dentist | Aggregate year-to-date | \$500.00 |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name George B Schimmel SW 'NOSXOVC' | 03/17/2014 | \$250.00 |
| Mailing Address | \dashv | |
| 3630 Kings Hwy BECEINED | | |
| City, State, Zip Code Jackson, MS 39216-3321 CO: IINV - 8dV 1 | | |
| Name of Employer (Required) Retired | | |
| Occupation (Required) | Aggregate year-to-date | \$250.00 |
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through 3/31/2014

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|-------------------------------|---------------------------------|--------|-------------|---------------|---------------------------|------------------------------------|
| Source: | Corporation | PAC | Individual | Loan | Date (Mo., Day, Year) | Amount of each receipt this |
| | Other (please spe | city) | | _ | (MO., Day, Tear) | period |
| Fu‼ Name Service C | ontractors LLC | | | | 03/17/2014 | \$300.00 |
| Mailing Addre | | | | | 1 | |
| City, State, Zi | | | | | - | |
| | MS 39215-1436 | | | | | |
| Name of Emp | loyer (Required) | | | |] | |
| Occupation (I | Required) | | | | Aggregate year-to-date | \$300.00 |
| Source: | Corporation | PAC | Individual | Loan | Date | Amount of each receipt this |
| | Other (please spe | cify) | | | (Mo., Day, Year) | period |
| Full Name New Engla | and Contractors | rrc | | | 03/18/2014 | \$300.00 |
| Mailing Addre | | | | | | |
| City, State, Zi | | | | | - | |
| • • | MS 39215-1633 | | | | | |
| Name of Emp | loyer (Required) | | | | | |
| Occupation (| Required) | | | | Aggregate year-to-date | \$300.00 |
| Source: | Corporation | PAC | Individual | Loan | Date | Amount of each receipt this |
| | Other (please spe | eclfy) | | | (Mo., Day, Year) | period |
| Full Name Martha Jo | ones | | | | 03/20/2014 | \$2,000.00 |
| Mailing Addre | ess nnel Creek Rd | | | | | |
| City, State, Z | | | | | 1 | |
| | oloyer (Required) | | | | | |
| Occupation (| Required) | | | | Aggregate year-to-date | \$2,000.00 |
| Source: | Corporation Other (please spe | PAC | ✓Individual | Loan | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name James Asi | hley Ogden | | | ė | 03/20/2014 | \$1,000.00 |
| Mailing Addr | ess | | .017 | JACKSON | 1 | |
| City, State, Z | | | - CIV | 7 1 1 1 1 1 - | \exists | |
| _ | MS 39201-2703 | | | BECEINE | | |
| | ployer (Required) Associates | | 1:03 | INA 1-898 41 | | |
| Occupation Attorney | | | | | Aggregate year-to-date | \$1,000.00 |

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| Source: | Corporation | PAC | ✓ Individual | Loan | Date | Amount of each |
|---|--|-------------|--------------|----------------------------|---|--|
| | Other (please spec | cify) | | | (Mo., Day, Year) | receipt this period |
| Full Name Gilbert St | turgie | · · · · · · | | | 03/20/2014 | \$500.00 |
| Mailing Addres | | | | | { | |
| 5738 Brown | | | | | 1 | |
| City, State, Zip | Code | | | | 1 | |
| Jackson, 1 | MS 39206-2715 | | | | J | |
| • | oyer (Required) | | | | 1 | |
| Retired | | <u></u> | | | | |
| Occupation (R | equired) | | | | Aggregate year-to-date | \$500.00 |
| Source: | Corporation | PAC | ✓Individual | Loan | Date | Amount of each |
| | Other (please spe | cify) | | | (Mo., Day, Year) | receipt this period |
| Full Name | | | | | 03/20/2014 | \$300.00 |
| L. Tanya | Walker | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Mailing Addre | | | | | | |
| 2891 Terr | | | | | - 1 | |
| City, State, Zip | MS 39212-3051 | | | | | |
| | oyer (Required) | | | | - | |
| | sociate of Ell: | is Isle | | | | |
| Occupation (R | Required) | | | | Aggregate year-to-date | \$300.00 |
| | | | | | Dete | |
| Source: | ✓ Corporation | PAC | Individual | Loan | Date | Amount of each |
| Source: | ✓ Corporation Other (please spe | _ | individual | | (Mo., Day, Year) | receipt this period |
| Full Name | _ | ecify) | Individual | | | receipt this |
| Full Name | Other (please spe | ecify) | ☐ Individual | | (Mo., Day, Year) | receipt this period |
| Full Name Capital R | Other (please spe otel Associate | ecify) | ☐ Individual | Loan | (Mo., Day, Year) | receipt this period |
| Full Name Capital R | Other (please spe otel Associate | ecify) | Individual | | (Mo., Day, Year) | receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig | Other (please spe otel Associate | ecify) | Individual | JLoan | (Mo., Day, Year) | receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig | Other (please special otel Associate ss | ecify) | Individual | JLoan | (Mo., Day, Year) | receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig | Other (please special otel Associate ss | ecify) | □Individual | Loan | (Mo., Day, Year) 03/21/2014 Aggregate year-to-date Date | \$1,000.00 \$1,000.00 |
| Full Name Capital R Mailing Addre City, State, Zig Name of Employee Occupation (F | Other (please special otel Associate ss p Code loyer (Required) | s LLC | | | (Mo., Day, Year) 03/21/2014 Aggregate year-to-date | \$1,000.00 |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: | Other (please special content of the | s LLC | | Loan | (Mo., Day, Year) 03/21/2014 Aggregate year-to-date Date | \$1,000.00 \$1,000.00 Amount of each receipt this |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: Full Name Jesse Sim | Other (please special content of the | s LLC | ✓Individual | TACKSON, MS. | Aggregate year-to-date (Mo., Day, Year) | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Emp Occupation (F Source: Full Name Jesse Sim Mailing Addre | Other (please special content of the | s LLC | ✓Individual | TACKSON, MS. | Aggregate year-to-date (Mo., Day, Year) | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Employer Occupation (F Source: Full Name Jesse Sim Mailing Addre 103 Harpe | Other (please special content of the | s LLC | ✓Individual | TACKSON, MS. | Aggregate year-to-date (Mo., Day, Year) | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: Full Name Jesse Sim Mailing Addre 103 Harpe City, State, Zig | Other (please special otel Associate iss processed in the content of the content | s LLC | ✓Individual | Leckson, MS. AECEIVED | Aggregate year-to-date Date (Mo., Day, Year) 03/21/2014 | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: Full Name Jesse Sig Mailing Addre 103 Harpe City, State, Zig Ridgeland | Other (please special content of the | s LLC | ✓Individual | CITY CLERK LACKSON, MS. | Aggregate year-to-date Date (Mo., Day, Year) 03/21/2014 | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: Full Name Jesse Sim Mailing Addre 103 Harpe City, State, Zig Ridgeland Name of Empl | Other (please special otel Associate iss processed in the content of the content | PAC ecify) | ✓Individual | Leckson, MS. AECEIVED | Aggregate year-to-date Date (Mo., Day, Year) 03/21/2014 | \$1,000.00 \$1,000.00 Amount of each receipt this period |
| Full Name Capital R Mailing Addre City, State, Zig Name of Empl Occupation (F Source: Full Name Jesse Sim Mailing Addre 103 Harpe City, State, Zig Ridgeland Name of Empl | Other (please special otel Associate iss processed in the content of the content | PAC ecify) | ✓Individual | Leckson, MS. AECEIVED | Aggregate year-to-date Date (Mo., Day, Year) 03/21/2014 | \$1,000.00 \$1,000.00 Amount of each receipt this period |

Full Name Tony Yarber Mailing Address 1605 Dorgan St City, State, Zip Code

| Reporting Period 3/1/2014 through 3/31 | ./2014 | |
|--|---------------------------|------------------------------------|
| ITEMIZED REG | CEIPTS | |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Joseph Simpson | 03/21/2014 | \$2,000.00 |
| Mailing Address 4141 Crane Blvd | | |
| City, State, Zip Code Jackson, MS 39216-3406 | | |
| Name of Employer (Required) The Simpson Group | | |
| Occupation (Required) | Aggregate year-to-date | \$2,000.00 |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name SOL Engineering Service LLC | 03/21/2014 | \$1,000.00 |
| Mailing Address PO Box 1327 | | |
| City, State, Zip Code Canton, MS 39046-1327 | | |
| Name of Employer (Required) | | |
| Occupation (Required) | Aggregate year-to-date | \$1,000.00 |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Tony Yarber | 03/21/2014 | \$20,000.00 |
| Mailing Address 1605 Dorgan St | | |
| City State 7in Code | | |

| Jackson, MS 39204-4306 | ! | |
|--|---------------------------|------------------------------------|
| Name of Employer (Required) City Of Jackson | | |
| Occupation (Required) | Aggregate year-to-date | \$20,000.00 |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full Name Greenway Schools/ Developement Center | 03/24/2014 | \$500.00 |
| Mailing Address 1633 Raymond Rd SH 105 NOVI | 341 | |
| City, State, Zip Code | | |
| Name of Employer (Required) | 11 | |
| Occupation (Required) | Aggregate year-to-date | \$500.00 |

through _____ 3/31/2014

| ITEMIZED RECEIPTS | | | | | |
|--|---------------------------|------------------------------------|--|--|--|
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period | | | |
| Full Name Pirouette Companies LLC | 03/24/2014 | \$1,000.00 | | | |
| Mailing Address | | | | | |
| 1266 W Paces Ferry Rd NW | | | | | |
| City, State, Zip Code | | | | | |
| Atlanta, GA 30327-2306 | | | | | |
| Name of Employer (Required) | | | | | |
| Occupation (Required) | Aggregate year-to-date | \$1,000.00 | | | |
| Source: Corporation PAC Individual Loan | Date | Amount of each | | | |
| Other (please specify) | (Mo., Day, Year) | receipt this period | | | |
| Full Name | 03/24/2014 | \$500.00 | | | |
| Southwest Maxillofacial Surgery & Implan | | , | | | |
| Malling Address | | | | | |
| 3885 Princeton Lakes Way SW City, State, Zip Code | | | | | |
| Atlanta, GA 30331-5599 | | | | | |
| Name of Employer (Required) | | | | | |
| Occurrent or (Deputted) | Aggregate | | | | |
| Occupation (Required) | Aggregate year-to-date | \$500.00 | | | |
| Source: Corporation PAC Individual Loan | Date | Amount of each | | | |
| Other (please specify) | (Mo., Day, Year) | receipt this period | | | |
| Full Name Sanjo Security Service Inc. | 03/25/2014 | \$500.00 | | | |
| Mailing Address | | | | | |
| 1615 S Gallatin St | | | | | |
| City, State, Zip Code | | | | | |
| Jackson, MS 39201-6406 | | | | | |
| Name of Employer (Required) | | | | | |
| Occupation (Required) | Aggregate year-to-date | \$500.00 | | | |
| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period | | | |
| Full Name | 03/26/2014 | \$300.00 | | | |
| Robert Braddy Sr. SW 'NOSNOY! | | | | | |
| Mailing Address XX373 X 10 531 R T Braddy Rd CIXIDIX | | | | | |
| City, State, Zip Code | | | | | |
| Florence, MS 39073-8084 CO: HV - HdV 1 | | | | | |
| Name of Employer (Required) Retired | | | | | |
| Occupation (Required) | Aggregate | \$300.00 | | | |
| and the state of t | year-to-date | \$300.00 | | | |

through

| 1. | T | E | M | 11 | Z | E | D | F | ₹ | Ε | С | E | Р | Τ | S |
|----|---|---|---|----|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | |

| Source: ✓ Corporation PAC Individual Loan | Date | Amount of each receipt this |
|--|---------------------------|-----------------------------|
| Other (please specify) | (Mo., Day, Year) | period |
| Full Name K & D Home Improvement | 03/26/2014 | \$500.00 |
| Mailing Address | - - | |
| 113 Pecan Ridge Dr | | |
| City, State, Zip Code | | |
| Terry, MS 39170-8722 | | |
| Name of Employer (Required) | | |
| Occupation (Required) | Aggregate year-to-date | \$500.00 |
| Source: Corporation PAC Individual Loan | Date | Amount of each |
| Other (please specify) | (Mo., Day, Year) | receipt this period |
| Full Name Joe Tatum | 03/27/2014 | \$1,500.00 |
| Mailing Address | - | |
| PO Box 22688 | | |
| City, State, Zip Code | | |
| Jackson, MS 39225-2688 | | |
| Name of Employer (Required) Tatum & Wade | | |
| Occupation (Required) | Aggregate year-to-date | \$1,500.00 |
| Source: Corporation PAC Individual Loan | Date | Amount of each |
| Other (please specify) | (Mo., Day, Year) | receipt this period |
| Full Name Barron Banks | 03/28/2014 | \$1,000.00 |
| | | , |
| Mailing Address 115 Carriage Hills Dr | | |
| City, State, Zip Code Jackson, MS 39212-3706 | | |
| Name of Employer (Required) | | |
| Jackson State University | 1 | |
| Occupation (Required) Professor | Aggregate year-to-date | \$1,130.00 |
| Source: Corporation PAC Individual Loan | Date | Amount of each receipt this |
| Other (please specify) | (Mo., Day, Year) | period |
| Full Name | 03/28/2014 | \$4,000.00 |
| Mitzi Bickers | | |
| Mailing Address 3306 Bay View Dr | | |
| City, State, Zip Code | | |
| Jonesboro, GA 30236-5478 | | |
| Name of Employer (Required) Self | | |
| Occupation (Required) | Aggregate year-to-date | \$4,000.00 |

| | Name | of | Candidate | or | Committee | Tony | Yarber |
|--|------|----|-----------|----|-----------|------|--------|
|--|------|----|-----------|----|-----------|------|--------|

Page 11 of 27

Reporting Period 3/1/2014 through 3/31/2014

ITEMIZED RECEIPTS

| Source: Corporation PAC Individual Loan Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
|---|---------------------------|------------------------------------|
| Full Name E. R. Mitchell | 03/28/2014 | \$10,000.00 |
| Mailing Address 1045 Research Center Dr. SW | | |
| City, State, Zip Code Atlanta, GA 30331 | | |
| Name of Employer (Required) E. R. Mitchell Construction | | |
| Occupation (Required) President | Aggregate year-to-date | \$10,000.00 |

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 Reporting Period
 3/1/2014
 through
 3/31/2014

ITEMIZED DISBURSEMENTS

| Full Name | Date | Amount of each |
|------------------------------------|--------------------------|---|
| Theresa G Kennedy | (Mo., Day, Year) | disbursement this period |
| Mailing Address | | |
| PO Box 391 | 03/07/2014 | \$857.15 |
| City, State, Zip Code | | |
| Ridgeland, MS 39158-0391 | | |
| Purpose of Disbursement (Optional) | Aggregate year-to-date | \$5,058.89 |
| Payroll | year-to-date | |
| Full Name Janene Tillman | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | (100,50), 100, | disoursement uns periou |
| 6538 Lyndon B Johnson Dr | 03/07/2014 | \$142.86 |
| City, State, Zip Code | | 72.2.0 |
| Jackson, MS 39213-2925 | | |
| Purpose of Disbursement (Optional) | Aggregate | |
| Payroll | year-to-date | \$2,036.55 |
| Full Name | | |
| Tony Yarber | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | (200, 20), 300, | diobardement this period |
| 1605 Dorgan St | 03/07/2014 | \$800.00 |
| City, State, Zip Code | | 700010 |
| Jackson, MS 39204-4306 | | |
| Purpose of Disbursement (Optional) | Aggregate | 42 000 0 |
| Payroll | year-to-date | \$3,200.00 |
| Full Name | Date | Amount of each |
| A to Z Printitng | (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| 5468 N State St | 03/10/2014 | \$3,213.0 |
| City, State, Zip Code | | |
| Jackson, MS 39206-3523 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$9,571.5 |
| 700 Yard Signs and Stakes | year-to-date | 45,571.50 |
| Full Name | Date | Amount of each |
| Warren Austin | | disbursement this period |
| Mailing Address | | |
| P.O. Box 34412 | 03/10/2014 | \$200.0 |
| City, State, Zip Code | | |
| Jackson, MS 39225 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$400.0 |
| Push Cards Printing | year-to-date | |
| Full Name | Date | Amount of each |
| Jackson F Press | (Mo., Day, Year) | |
| Mailing Address | BECEI | |
| 125 S Congress St | 03/10/2014 | \$556.7 |
| City, State, Zip Code | 03/10/2014 | |
| Jackson, MS 39201-3300 | · | |
| Purpose of Disbursement (Optional) | Aggregate | \$1,296.2 |
| advertisement | year-to-date | 1 , 4, 2, 5, 1, 2 |

through _____3/31/2014

ITEMIZED DISBURSEMENTS

| Full Name | Dete | Amount of such |
|------------------------------------|--------------------------|---|
| Angela Grayson | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| 3100 Woodbine St | 03/11/2014 | \$43.40 |
| City, State, Zip Code | | • |
| Jackson, MS 39212-4278 | | |
| Purpose of Disbursement (Optional) | Aggregate | 21 222 42 |
| Reimbursement | year-to-date | \$1,093.40 |
| Full Name | B-4- | |
| WJMI & WKXI | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| 731 S Pear Orchard Rd | 03/11/2014 | \$2,233.80 |
| City, State, Zip Code | | |
| Ridgeland, MS 39157-4800 | | |
| Purpose of Disbursement (Optional) | Aggregate | A5 733 00 |
| Radio Advertisement | year-to-date | \$5,733.80 |
| Full Name | P-4 | August of the land |
| WMPR | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| 1018 Pecan Park Cir | 03/11/2014 | \$500.00 |
| City, State, Zip Code | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Jackson, MS 39209-6913 | i | |
| Purpose of Disbursement (Optional) | Aggregate | 60, 200, 00 |
| Radio Advertisement | year-to-date | \$2,300.00 |
| Full Name | Date | Amount of each |
| George Jones | (Mo., Day, Year) | |
| Mailing Address | | |
| 1728 Dewey St | 03/12/2014 | \$126.01 |
| City, State, Zip Code | | |
| Jackson, MS 39209-5615 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$1,276.01 |
| Paid Canvassing | year-to-date | 71,270.01 |
| Full Name | Date | Amount of each |
| WMPR | (Mo., Day, Year | |
| Mailing Address | | |
| 1018 Pecan Park Cir | 03/12/2014 | \$1,800.00 |
| City, State, Zip Code | | |
| Jackson, MS 39209-6913 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$2,300.00 |
| Radio Show | cunve year-to-date | 42,300.00 |
| Full Name | ALIO Date | Amount of each |
| A to Z Printitng | 기구성 (Mo., Day, Year | |
| Mailing Address | and shall | |
| 5468 N State St | 1-8dV 11 03/13/2014 | \$3,564.0 |
| City, State, Zip Code | | |
| Jackson, MS 39206-3523 | | |
| Purpose of Disbursement (Optional) | Aggregate | |
| Purpose of Dispursement (Optional) | year-to-date | \$9,571.50 |

Name of Candidate or Committee Tony Yarber

 Reporting Period
 3/1/2014
 through
 3/31/2014

ITEMIZED DISBURSEMENTS

| Full Name | Date | Amount of each |
|--|---------------------------|---|
| Warren Austin | (Mo., Day, Year) | disbursement this period |
| Malling Address | 03/13/2014 | 6222 02 |
| P.O. Box 34412 | 03/13/2014 | \$200.00 |
| City, State, Zip Code | | |
| Jackson, MS 39225 | | |
| Purpose of Disbursement (Optional) | Aggregate year-to-date | \$400.00 |
| Push Cards Printing | 700.10 0010 | |
| Full Name Capital Club | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | | |
| PO Box 1432 | 03/13/2014 | \$625.10 |
| City, State, Zip Code | | |
| Jackson, MS 39215-1432 | | |
| Purpose of Disbursement (Optional) | Aggregate | |
| Prayer Breakfast Food | year-to-date | \$625.10 |
| Full Name | | |
| Jackson Jambalaya | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | (Mo., Day, Tear) | dispursement this pendo |
| 855 S Pear Orchard Rd | 03/13/2014 | \$500.00 |
| City, State, Zip Code | | \$500.00 |
| | 1 | |
| Ridgeland, MS 39157-5113 Purpose of Disbursement (Optional) | Aggregate | |
| Jackson Jambalaya Advertisement | year-to-date | \$500.00 |
| | | |
| Full Name | Date | Amount of each |
| Lamar Companies | (Mo., Day, Year) | disbursement this period |
| Mailing Address | 02/12/0214 | |
| 401 Country Place Pkwy | 03/13/2014 | \$1,260.00 |
| City, State, Zip Code | | |
| Pearl, MS 39208-6774 | | |
| Purpose of Disbursement (Optional) | Aggregate year-to-date | \$6,960.00 |
| Billboards | 701.10 010 | |
| Full Name | Date | Amount of each |
| TNT Shirts | (Mo., Day, Year) | disbursement this period |
| Malling Address | | |
| 700 S State St | 03/13/2014 | \$780.84 |
| City, State, Zip Code | | |
| Jackson, MS 39201-5613 | | |
| Purpose of Disbursement (Optional) | Aggregate | \$930.7 |
| T shirts printing | year-to-date | |
| Full Name | Date | Amount of each |
| Broad Street | (Mo., Day, Year) | |
| Mailing Address 4465 1-55 North City State Zip Code | ולי או | |
| 4465 1-55 North | 03/13/2014 | \$384.1 |
| City, State, Zip Code | | |
| Jackson, MS 39206 | ` . | |
| | | |
| Purpose of Disbursement (Optional) | Aggregate year-to-date | \$837.5 |